

**APPLICATION DATA SHEET****Application Information**

<b>Application Number::</b>	National Stage of PCT/FI03/000522
<b>Filing Date::</b>	December 9, 2004
<b>Application Type::</b>	Regular
<b>Subject Matter::</b>	National Stage Application
<b>Suggested Classification::</b>	None
<b>Suggested Group Art Unit::</b>	None
<b>CD-ROM or CD-R?::</b>	No
<b>Number of CD Disks::</b>	0
<b>Number of Copies of CDs::</b>	None
<b>Sequence Submission?::</b>	No
<b>Computer Readable Form (CFR)?::</b>	No
<b>Number of Copies of CFR::</b>	None
<b>Title::</b>	A METHOD FOR THE PREPARATION OF DOPED OXIDE MATERIAL
<b>Attorney Docket Number::</b>	43289-211640
<b>Request for Early Publication?::</b>	No
<b>Request for Non-Publication?::</b>	No
<b>Suggested Drawing Figure::</b>	NONE
<b>Total Drawing Sheets::</b>	TWO
<b>Small Entity?::</b>	NO
<b>Latin Name::</b>	
<b>Variety Denomination Name::</b>	
<b>Petition Included?::</b>	No
<b>Petition Type::</b>	None
<b>Licensed US Govt. Agency::</b>	
<b>Contract or Grant Numbers::</b>	None
<b>Secrecy Order in Parent Appl.::</b>	

**Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** Finnish  
**Country::** Finland  
**Status::** Full Capacity  
**Given Name::** Kauko  
**Middle Name::**  
**Family Name::** JANKA  
**Name Suffix::**  
**City of Residence::** TAMPERE  
**State or Province of Residence::**  
**Country of Residence::** Finland  
**Street of Mailing Address::** Maisterinkatu 12  
**City of Mailing Address::** TAMPERE  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** Finland  
**Postal or Zip Code of Mailing Address::** FIN-33720

**Applicant Authority Type::** Inventor  
**Primary Citizenship::** Finnish  
**Country::** Finland  
**Status::** Full Capacity  
**Given Name::** Markku  
**Middle Name::**  
**Family Name::** RAJALA  
**Name Suffix::**  
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**State or Province of Residence::**  
**Country of Residence::** Finland

**Street of Mailing Address::** Klaavuntie 9 A 3  
**City of Mailing Address::** HELSINKI  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** Finland  
**Postal or Zip Code of Mailing Address::** FIN-00910

### Correspondence Information

**Correspondence Customer Number::** 26694  
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### Representative Information

**Representative Customer Number::** 26694

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
	Continuation of		
	Continuation of		
	Continuation of		
	Continuation of		

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Finland	20021269	June 28, 2002	Yes

## Assignee Information

**Assignee Name::** Liekki Oy  
**Street of Mailing Address::** Sorronrinne 9  
**City of Mailing Address::** LOHJA AS  
**State or Province of Mailing Address::**  
**Country of Mailing Address::** FINLAND  
**Postal or Zip Code of Mailing Address::** FI-08500